LOVELACE FAX No. 608 465 1114 P. 001

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JUN 2 - 2014

dnr.wì.gov

State of Wisconsin
Department of Natural Resources
Private Water Systems Section Box WATER & High Capacity, School or Wastewater Treatment Plant
Well Approval Application

Form 3300-256 (R 7/05)

Page 1 of 6

Notice: Prior department approval is required for the construction, reconstruction or operation of a high capacity well or system of high capacity well or system of high capacity well or a wastewater freatment plant well in accordance with Section NR \$12.09(4)(a), Wisconsin Administrative Code. Personally Identifiable information collected on this form, including such data as your name, address and phone number, will be used for management of department programs and is unlikely to be used for other purposes. This information will be addressable under Wisconsin's Open Records Laws, ss. 19.32 - 19.39, Wis. Stats.

Use this form to request an approval for installation of a wall or walls on a high capacity property, seek approval to make other charges to a high capacity property or to modify a well on a high capacity property, as required by NR 812.09(4)(a), Wisconsin Administrative Code. Refer to definitions of high capacity well, high capacity property and high capacity well system on page 5.

This form is not intended to be used when seeking approval for construction or modification of wells serving water systems regulated under ch. NR 811, Wis. Adm. Code. Any water system serving 7 or more homes, 10 or more mobile romes, 10 or more epartments, 10 or more duplexes is regulated under th. NR 811, Wis. Adm. Code. See NR 811.01, Wis. Adm. Code for applicability requirements.

Applicant Information					f =	
Application Prepared By (Name and Title)		Company	• • • • • • • • • • • • • • • • • • • •		6	
Scott 16K		LOVELACE	WELL	DRICLING	STE	
Street Address		City	State	ZIP Code		
WYSIO CTY		Cambria WI 53923				
Telephone Number	Fax Number	E-Mall Address	9		3	
608-465-,1010	608-465-1	114 meli	ssalpc@1	ds.net		
Property Ownership Information	· ·		. '		ı.	
Property owner, if different than applicant	(Name of Person and Title)	Company				
Mile Manthey						
Street Address	- 4	CIP .	State	ZIP Cade	in the second	
N7569 AHK	inson /2	Pardee ville	L. WI	53954		
Telephone Number	Fax Number	E-Mall Address	3			
608 424 9574						
Well Operator Information		****				
Well operator if different then owner (Nam	e of Person and Title)	Company				
Street Address		City	State	ZIP Code		
	10	W 170	1	ł	S	
Telephone Number	Fax Number	E-Mail Address	5			
,	11		, ,	52		
Property Information			· · · · · · · · · · · · · · · · · · ·			
Enter the High Canacity Wall File Number be	low if the grounty is already	a high capacity property. If the	property is not designa	ited as a high capacity		
property of the time of application enter "NO	NE " NOTE: Flad the file num	her in unner noht hand comer	of the most recent high	r capacity well approve.		
or use the compact disk of departmental well "Location" section, File number format is as	i data that is issued to uniters a follows: (1 or 2 digits for county	and pump instellers. On the col y) - (1 digit for well placsification	n) - (1 to 4 digits for as	signed property no.)		
County	Town	Hlg	h Capacity Well File I	io.		
Columbia	Marcel	lon			42	
Submittal Purpose	1 / 100 / 0 - 0	1				
Check all that apply:			· · · · ·	M		
Install one or more new wells with a	a capacity greater than 70 c	gallons per minute.				
Install one or more new wells with			pacity property.			
Replace one or more wells with a c						
Replace one or more wells with a c			acity property.			
Reconstruct one or more wells with					2.1	
			capacity property.		:32	
Reconstruct one or more wells with a capacity less than 70 gallons per minute on a high capacity property. Increase pumping rate in one or more wells to a rate greater than previously approved.						
Request continued operation of hig			lication fee regulred	.)		
Renew a previous approval that ha		S	,	(2)		
		nt. See definitions on page	5.			
Well (or wells) will serve a school or wastewater treatment plant. See definitions on page 5. Other, explain						
Oniai exhiain			The state of the s		ń.	

P. 002

Form 3300-256 (R 7/05) Page 2 of 6 Site Status Information Determine the site status using the internet or the compact disk of departmental well data that is leaved to drillers and pump installers and the information supplied by the property owner. Internet address is dnr.wi.gov/org/water/dwg/ctws.htm. Enter YES or NO for each of the following questions. YES Has the property boundary changed since the most recent high capacity well epproval was issued? If the property is not yet a high capacity property, check NO. Has there been a change in well ownership since the last approval was written? If YES, name of current owner, Date of purchase: Has there been a change in well operator since the last approval was written? If YES, name of current operator: Date of change: Will a proposed well be connected to a plumbing system that is supplied by other sources (other wells, municipal supply, etc. y? If YES, include a sohematic drawing showing backflow protection. s a proposed well within 1,200 feet of a landfill? Determine if there are any landfills nearby, using the well information compact disk FIND feature. Enter the township, range and section of the well location. If the well is near a section tine, also check the adjacent section or sections. If YES, list the landfill alto ID Number: Landfill location; (Township/Range/Section) QR Is a proposed well on a property that has a contaminated site? If YES, list the BRRTS (Bureau for Remediation and Redevelopment Tracking System) Number here and specify if the site is open or closed: Open Closed is a proposed well on a property that has a groundwater use restriction recorded on the deed? If YES, list the BRRTS number, as assigned to the contaminated site by the DNR remediation and redevelopment program: la a proposed well on a properly that is listed on the department's registry of closed remediation eites for a groundwater use restriction? See compact disk or internet at maps.dnr.state.wi.us/imf/dnnmf.jsp?site=brrtg. If YES, list the BRRTS Number Is a proposed well to be used for a public water supply system that serves 25 or more people? See definition of a "public water System" in the definitions section on page 6. is a progosed well to be installed within a special casing area? Refer to the list of special casing areas that is published by the department and/or contact the regional DNR office. has the number of wells or pumping capacity in an existing well increased since the most recent high capacity well agaroval was Issued? Has the number of wells decreased since the most recent high capacity well approval? If the property is not yet a high capacity property, check NO. la anon-pressurized storage vessel (i.e. reservoir) other than a pond proposed or in use? Will the well discharge directly to a storage pond? Is a pressurized tank with a capacity greater than 1,000 gallons proposed or in use? Is proposed well within 1,200 feet of a quarry? Is a proposed well located in a floodplain or floodway? Are any existing well installations on the high capacity property out of compliance with Chapter NR 812, Wisconsin Administrative Code? Will the well be used as a source of bottled water? Are you seeking a variance to construct a well that has a capacity of less than 70 gallons per minute to low capacity well construction standards? Is the property served by a community water system?

Existing Well Information		· · · · · · · · · · · · · · · · · · ·				Form 3300-256		Page 3 of
Enter the following information of	n all existing	velis an th	e orgoerly If	more than to	· Viir Wella aub	mit additional	chaota	
Wall Name Assigned by Well Owner (North Well, etc.):			o property, ii	more than to	yur wans, and	on adollotisi	aneary,	
Well Number Assigned by Owner (001, 002, etc.):	1 1							14 <u>14 Mariantes a a sess</u>
WI Unique Well Number or NA if no number:	No							
Permanent DNR High Capacity Well Number or N/A If none:								
Public Water System ID Number, if Public (if not public, NONE):								
Potable or Non-Potable Use:	Patab	le			2	•		
Type of Well (Intgation, Industrial, Residential, etc.):	Reside	ntial						****
Requested Average Water Usage per Day in Gallone:						~		
Requested Maximum Water Usage per Day in Gallons:				· .				·
Seasonal? (April to October, Year Around, etc.):						·		
Approved Pumping Capacity If Previously Approved (gpm):					• • • • • • • • • • • • • • • • • • • •			
Current Pump Type & Capacity (gpm)	506.		1	 				
Proposed Pump Type & Capacity If Change Requested (gpm):			-			·		
Pump Discharge Type (Over Top of Casing Seel, Pilless, etc.):		 {				***	***************************************	
Discharge Location (Building Pressure Tank, Pond, etc.):	Building	Proper				**		
Height of Wall Casing Above Ground in Inches:		(7-1545	100			V		
Potential Confaminant Sources and Distançe:	Septre 7	0"	 		_	-		_
Well Loc: Quarter Quarter Section	1/4 of	1/4	1/4	of 1/4	1/4	of 1/4	1/4 0	f 1/4
or Government Lot Number	1			<u> </u>	73	yı	174 (/	1/4
Section or French Long Lot No.					-			
Township: Wynceng	T 12		<u> </u>		<u> </u>			···
Range (Select & or W):		N N	T	<u> </u>	ļT	N N	<u> </u>	m ~
Latitude (Degrees and Minutes)	R 10	ZE □w	r -	□E □W	1	LEW	R	LELW
Longitude (Degrees and Minutes)	<u> </u>	<u></u>	·		° _			
GPS Map Datum (WGS84, WTM91, etc.)	<u>D89. 14</u>	1814	° _	<u></u>	•	·———	a	<u></u>
oclude as much of the following inform	ațion es practice	l for welle ti	et de not have	well construc	alon records at	tached to the a	pplication, how	ever if the
vell construction record is anached, ap Pate of Construction:	piicant may leav	e the tokow	ng rows blank		· · · · · ·		_	
					<u> </u>			
Oritled by (Name of Drilling Firm): Oritling Method(s) (Rotary,	<u>₹</u>						· ·- ·-	•
Percussion, Etc.) Vell Depth in Feet:	7	i						
pper Enlarged Drithole Diameter in							~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Inches and Depth in Feat:	inches,	feat	inches.	fsat	Inches,	feet	inches,	feet
ower Drillholo Diameter in inches and Depth in Feet	inches.	feet	inches,	faet	inches,	feet	inches,	fest
vell Casing Diameter in Inches and Depth in Feet	inches,	feet	inches,	feel	inches.	feet	Inches,	feet
/ell Casing Meterial and Well Thickness:								
nnular Space Material Between Casing and Drillhole Wall:		}	 					
There a Well Screen (Y or N) If so, Screen Material?:								

		Form 3300-286 (R 7/0)) Page 4 of
Proposed Well Information			
Enter the following Information on a	li proposed wells on the property, if more than two wells or alt	emate construction, submit a	dditional aheets:
Well Name Assigned by Well Owner (North Well, etc.):	#2		
Well Number Assigned by Owner (001, 002, etc.):	Hz	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Well Loc: Quarter Quarter Section or French Long Lot Number	5 E 1/4 of SE 1/4 of Section 36	1/4 of 1/4 of	Section
or Government Lot Number			
Township & Range (Select E or W	13 N.R /D PE TWIT	N.R	□E □W
Latitude (Dagrees and Minutes)	N 43 . 33 470	0	t
Longitude (Degrees and Minutes)	089 15015	0	
GPS Map Datum (WGS84, WTM91, etc.)			
Type of Well (Irrigation, Industrial, Residential, etc.):	Type: TRR Polable Type:		Potable Non-Potable
Orilling Method(s) (Rotary, Percussion, Etc.):	Rotery		
	Depths that Are Expected During Drilling:		
Material and Dopth Interval:	SAND from 0' to ZO	from	0.10
Material and Depth Interval;	SANDSTANE from 20 to 400	from	' to
Material and Depth Interval;	from to	. from	' to
Malerial and Depth Interval:	from ' to '	from	' to
Material and Depth Intervet:	from to	from	' to
Orlihole Diameter and Articipated Dep			
Diameter and Depth Interval:	19 from 0 to 40 to	from	' to
Diameter and Depth Interval:	/3 from 40' to 400'	from	<u>' to '</u>
Diameter and Dopth Interval:	, from ' to '	from	, po
Diameter and Wall Thickness	nd Wall Thickness at Anticipated Depth Intervals;		
et Depth Interval: Diameter and Wall Thickness	19 "diam/ *thick 0' to 40.	*dlám/ * thíck	0' to '
at Depth Interval; ermenent Casing or Liner Material , if	"diam/ "thick 'to '	"dlam/ "thick	' to
Casing Joints (Welded, T end C, etc.)	Welded	· · · · · · · · · · · · · · · · · · ·	
Material and Weight			
et Depth Interval: Material and Weight	/ lbs/foot 0 to '		0' to '
at Depth Interval:	/ Ibs/foot to	/ lbe/foot	' to '
arven Meterial, Slot Size in Inches and Depth Interval or N/A if none:	plone , ", "		' to '
Casing to Screen Joint (Welded, T and C, K Packer, etc.)			
nnular Space Material Including Filter			
Material and Depth Interval:	Grout 1 0, 10 40.	/	0' to '
Meterial and Depth Interval:	/ ' to '	. /	' to '
oposed Average Water Usage Per Day In Gallons:			
oposed Maximum Waler Usage Per Day In Gallons:			
easonet? (April to October, Year · Around, etc.):	Seasonal		
oposed Pump Type & Capacity (gpm):	GSO GPN SUD		
scharge Type (Over Top of Casing Seal, Pitless Adapter or Unit):	Over the top		
scharge Location (Building Pressure Tank, Pond, etc.):			
etance and Direction to Nearest Public Littity Wall & Well Name:	3 miles SW Parcleeville		
stance to Other Potential Contaminant Sources:	M) a is	*****	
otance to Other Potantial Contaminant Sources:			
ave Blank, for Department use only		-	-
<u></u>			

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Required Attachments

- Attach one of the maps described in A. or B., below. Plot the existing and proposed well locations on the map. For wells that have a Wisconsin Unique Wall Number or a Permanent High Capacity Wall Number, plot the well locations with one of those numbers.
 - A. Copy of a plat map with the property boundary clearly shown. If the property is configuous with properties owned by the same owner in another township, Include a copy of that township men too, showing the property boundaries. If the property owner listed on the plat map is different from the current owner, list the date or dates, that the current property owner purchased the property on the mep.
 - B. Map of the property prepared by a licensed land surveyor and the property description as described by the surveyor.
- 2. Sketch map showing all of the following that are plenned or exist within 300 feet of each proposed well: proposed well jucation; other wells; properly boundary; wetlands; potential contaminant sources (septic tank and drainfield, petroleum storage tanks, sewer lines, etc.); buildings and north arrow, if no pertinent features to map within 300 feet of the proposed well, for example an intigation well in the middle of a field, state that on the property map listed above and plot the well localions on that map.
- 3. Any well construction records available for existing wells on the property. Do not attach any well construction records for wells that are not on the property. If a Wisconsin Unique Well Number has not been assigned, write a well name or alter well number on the record that correlates to the well name or number plotted on the maps.
- 4. For proposed wells with a capacity greater than 400 gallons per minute, include the performance curve or performance table that is provided by the pump manufacturer. If the pump will be a lineshaft turbine, provide a curve with the same rpm as the motor under full load and list the motor horsepower.
- If more than one well is connected to a common plumbing system, also provide a schematic drawing of the system showing method of preventing backflow. This sketch must include the well discharge (pittess, over top of casing earlitary seal); the water line from the well; pressure tanks; sampling faucets; check valves; backflow preventers; air gaps; manually operated valves; water meters; pressure awitches for pumps; and any other pertinent fittings. This schematic drawing must also identify which of these components ere burled or above ground. If there is more than one check valve within the well casing, include in-well check valves on the achematio.
- 6. If reconstruction of an existing well is proposed, include a diagram of the current well construction and a diagram of the proposed construction.
- If the application is for a high capacity well or wells, a \$500,00 check payable to the Department of Natural Resources, unless the application is only for continued operation after a change of ownership.

Certification and Applicant Signatures

If the application requests a variance for a well within 1,200 feet of a landfill, a well on a property with a groundwater use restriction, or any other variance to NR 812, Wis. Adm. Code, the property owner must sign the application. If the well operator will install a well on property that he or she does not own, the property owner must also sign the application. Otherwise, an agent of the owner may sign the application.

Unsigned and incomplete applications will not be approved.

By signing this form, the parson eigning this application certifies that to the best of his or her knowledge, all existing well installations on the property comply with ch. NR 812, Wis. Adm. Code, The person also certifies that to the best of his or her knowledge, all information In the application is accurate and correct.

Name-Print Mike Manthey	***************************************	Check Box Owner	Agent of the Owner
Signature Marks	Company		Date 2-23-14
Application submittel. Mail completed application section - DG/2, PO Box 7921, Madison WI 53707	and payment with all require 7921.	ed attachments to DNR, P	rivate Water Systems
Definitions from Wisconsin Administrative Cod	es iv		

"High capacity property" means one property on which a high capacity well system exists or is to be constructed. [NR 812.07(52)]

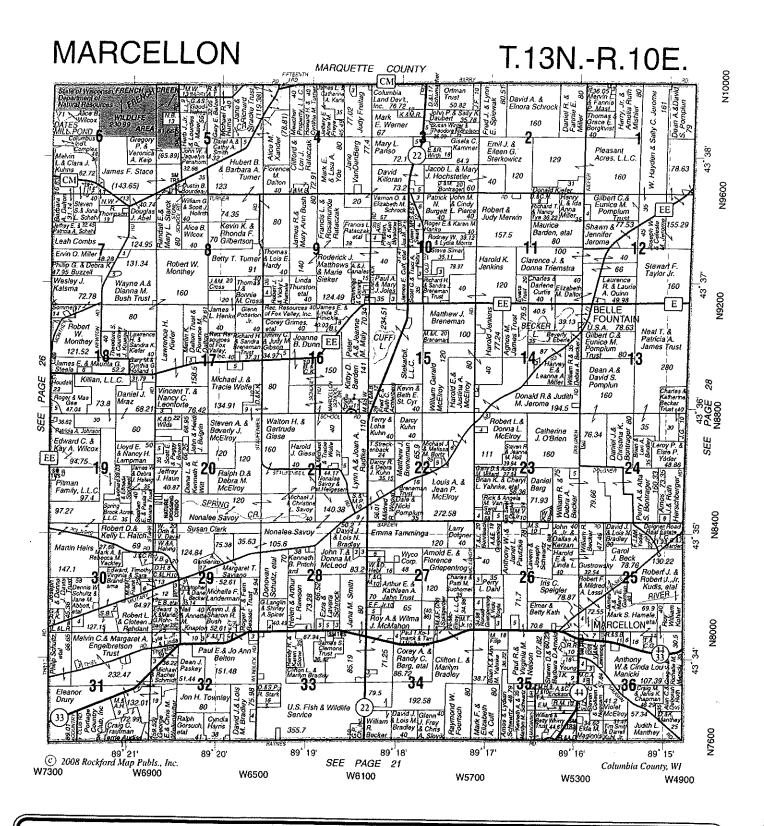
"High capacity well system" means one or more wells, drillholes or mine shafts used or to be used to withdraw water for any purpose on one property, if the total pumping or flowing capacity of all wells, drillholes or mine shafts on one property is 70 or more gallons per minute based on the pump curve at the lowest system pressure setting, or based on the flow rate. [NR 812.07(63)]

"Public water system" means a system for the provision to the public of piped water for human consumptions if such system has at teast 16 service connections or regularly serves an everage of at least 25 individuals daily at least 60 days per year. A public water system is either a community water system or a non-community water system. Such system includes: (a) Any collection, treatment, storage, and distribution facilities under control of the operator of such system and used primarily in connection with such system, and (b) Any collection or pretreatment storage facilities not under such control which are used primarily in connection with such system. [NR 812.07(80)

"School" means a public or private aducational facility in which a program of advoational instruction is provided to children in any grade or grades from kindergarten through the 12th grade. Water systems serving athletic fields, school forests, environmental centers. home-based schools, day-care centers and Sunday schools are not school water systems. [NR 812.07(94)]

"Wastewater treatment plant" means any facility provided for the treatment of senitary or industrial wastewater or both. The following types of facilities are excluded: (a) Facilities defined as private newage systems in s. 145.01(12), Stats, (b) Pretreatment facilities from which effluent is directed to a public sewer system for treatment. (c) Industrial wastewater treatment facilities which consist solely of a land disposal system. [NR 114.03(14)]

[&]quot;High capacity well" means a well constructed on a high capacity property. (NR 812.07(61))





Scotty Smith, Broker/Manager ABR, CRB, CRS, GRI, SRES

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